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ABSTRACT

Vita review is used by most prospective employers to determine which applicants will be interviewed for a particular position opening in clinical practice. Most graduate students have little knowledge and no training in this topic, which is vital for professional development. Specific examples of vitae construction are provided for one of the three major professional tracks in psychology: clinical practice. Eleven major elements of the clinical practice vita are discussed with what and how much to include in each area. The focus is on what the reviewer needs to see to grant an interview. The most common vita error of newly graduated doctoral students in psychology (creating a professional vita using their pre-doctoral internship vita as the foundation) is addressed. An outline to follow for creating a clinical practice vita is included with discussion. Anonymous samples of actual vitae submitted for clinical position review appear in Appendix A; and samples of vitae (one anonymous, the other the author's actual vita) using a more organized format appear in Appendix B. Vitae from related professions are included for comparison. The presentation of this paper and the paper itself were developed in response to a need identified by the American Psychological Association Graduate Students Division and the APA Board of Educational Affairs. (EMK)

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ED 422 537

BUILDING A VITA FOR THE CLINICAL PRACTICE

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Abstract

The purpose of this paper is to provide specific examples of vitae construction for one of the three major professional tracks in psychology: clinical practice. Samples of anonymous vitae appear in Appendix A; and a samples of vitae (one anonymous, the other the author's actual vita) using a more organized format appear in Appendix B. Also included in this paper is an outline to follow for creating a clinical practice vita. The presentation of this paper and this paper itself were developed in response to a demonstrated need for such information by the American Psychological Association Graduate Students division (APAGS), and the APA Board of Educational Affairs.

BUILDING A VITA FOR THE CLINICAL PRACTICE POSITION

A graduate student in psychology focuses upon learning information and developing skills in theory, research, and writing, as a part of their course of studies in professional psychology. However, there is one final writing assignment in which graduate students have exhibited great difficulty, and it is an assignment having tremendous implications upon students' potential to secure a future professional position. This most difficult of written assignments is to develop an effective and concise vita (Brems, Lampman, & Johnson, 1995).

The vita for a clinical practice position is the one chance a new doctoral graduate gets to showcase their educational and professional accomplishments to a prospective employer with the hopes of obtaining a personal interview. Vitae review is the primary criterion used by most prospective employers to determine which of the approximately 10% of all applicants will get an interview for a particular position opening (Tentoni, 1997b).

The importance of vita construction and formatting has not been a primary professional development topic addressed in most psychology doctoral programs, but it should be. Many completing students have no idea how much or how little to include in a vita. Fewer students still know how to format a vita so the reviewer will get the necessary information in the order the reviewer wants to see it in.

This paper will discuss the eleven major elements of a clinical practice vita (name, address, phone, and e-mail; objective(s); educational experience; licenses/certification; internship(s); professional experience; administrative experience; teaching experience; representative publications; representative presentations; and honors/achievements/organizations) and the amount of information to put into each segment.

The Most Common Vita Error

The most frequent error made by newly graduated doctoral students is creating

a professional vita using their pre-doctoral internship vita as the foundation (Tentoni, 1997a). The pre-doctoral vita is way too long and far too detailed in scope, and often is not a suitable format for someone seeking a professional position in psychology because of the time it takes a reviewer to read this type of vita. (*See Appendix A, item 3*)

It does not take a reviewer very long to tell if they are holding the vita of a new doctoral student, as those can be best determined by their sheer weight alone. In reviewing a number of vitae submitted to me for a vacant position at my home institution a couple years ago, approximately 60 candidates filed a vita with our personnel clerk. Of these, five were new doctorates. The average vita length of these new doctorates went 13 pages, excluding reference letters, reprints, pre-prints, etc. ! Now, I am fully aware that a person does not get a doctorate every day and the achievement of obtaining the highest academic degree in one's field took a tremendous amount of work and accomplishment. However, I have been in the field for 24 years and like to view myself as being rather accomplished as a presenter and have published a fair amount for being a practitioner. My vita only goes 2½ pages in length !! (*See Appendix B, item 2*)

If you are a new doctorate, your first order of business is to re-tool your vita. Feel free to list your educational background, but do not include the names of your supervising professors, etc., on your vita. Chances are that someone reading your vita will not know your faculty unless that faculty is really well-known in the field. Do not go into obsessive detail about your clinical internship and other associated duties while a doctoral student. Any professional psychologist reviewing your vita will have done those things to get their own doctorate. Resist the urge to summarize your "assessment experiences", or, the list of how many of what type of psychological test you have administered and interpreted. The only information a reviewer may be interested in is to exhibit some familiarity with

psychological testing. Teaching and research experience should only appear on your first post-doctoral vita if and only if you were paid for doing it, and list only relevant publications. Teaching, research, and publishing are activities you may have done in order to get your degree, but those activities are not highly prized in the general clinical practice sector. Not going into great detail about the internship; assessment experience; teaching. research, and publication activities could literally cut nearly 10½ pages out of the typical average 13 page vita.

Other Professions' Vitae Styles

Appendix A contains two other vitae that have been rendered anonymous. However, they are actual vitae submitted for a position at my home institution back in 1995. The official job description for the open position of "senior psychologist" listed the following educational and certification requirements: 1) a Ph.D. in psychology; 2) a minimum of three years clinical experience; and 3) a license to practice psychology in the State of Wisconsin.

Despite the qualifications asked for in the official job description, several applicants elected to submit credentials for consideration and neither met the primary educational requirements. *Appendix A, item 1*, is a vita submitted by a person with a new master's degree in "marriage and family therapy", which was a representative sample of vitae from a new master's degree holder. The vita is only one page in length and relatively to the point. The applicant did not have much in the way of clinical experience, even as an "intern". *Appendix A, item 2*, is a vita submitted by a person with a master's degree in social work and a doctorate in "human services administration", and was a representative sample of vitae from a clinical social worker. The vita is three pages long and loaded with all kinds of clinical work experiences. This style of vita gives the impression that although the position was for a "senior psychologist", the applicant may have thought by unleashing a vast variety and number of clinical experiences, this vita would be

considered *equivalent* to a doctorate in psychology. While this applicant's experiences are quite diverse and varied, the doctorate was not in the required field, and the applicant did not have the appropriate state license to be considered further. Additional review of these two vitae will indicate each person presented their information almost in the opposite order to the other.

Neither of these two candidates had anything to lose by submitting a vita for a position for which they did not meet the requirements. It is unknown how well each responded to the form rejection letter they received shortly after the "first cut" had been made with respect to the review of applicants. Successful job hunting does require an applicant to be resourceful and leaving no stone unturned (Tentoni, 1997b). Yet, applicants are advised to realistically assess their chances at a position, and especially so when they know they are not meeting the educational requirements for the position.

An Outline for a Clinical Practice Vita

As stated earlier, there are eleven major elements of a clinical practice vita, with those being: **1)** Name, address, phone, and e-mail; **2)** Objective(s); **3)** Educational experience; **4)** Licenses/certification; **5)** Internship(s); **6)** Professional experience; **7)** Administrative experience; **8)** Teaching experience; **9)** Major or representative publications; **10)** Major or representative presentations; and **11)** Honors/achievements/organizations). Each element will be discussed below, and the elements appear in the numerical order of importance to a vita reviewer.

Prior to discussing the major elements, it must be stated that the best investment one can make in themselves is to become computer literate enough to do basic word processing, which allows for the creation of a vita that looks more like it was professionally printed than typed. Using a word processing program allows for easy saving and editing of the vita to tailor it better for particular positions one applies for.

The first major element of a vita is *name, address, phone, and e-mail*. Make sure this area stands out well on your vita because this area is what a personnel or human resources clerk may be using to send correspondence to you. Make sure you list a phone number you can be reached at or through. There is nothing more frustrating to an employer than finding that address and/or phone information is incorrect, or the applicant is too hard to locate to set up an interview. Do not include your Social Security number or your date of birth in this area, or anywhere else on your vita.

The second major element is that of *objective(s)*. This area allows the applicant to indicate what primary aspect of the field the applicant wishes to work in. The objective(s) should also pertain to the job duties that might be listed for the position.

The third major element is that of *educational experience*. One of the first criteria used to determine an applicant's eligibility to be considered for a position is their educational background. Therefore, it is recommended to let employers know about the college degrees you hold as soon as possible in your vita. Indicate the degree by way of initials. After that, list the college/university from which you got the degree, followed by the year the degree was awarded. If you have any additional formal education, list that in this area too.

The fourth major element is that of *certificates/licenses*. This element is a major criteria in determining eligibility for a position. List the exact title of the license, the state from which it was issued, and the certificate number. That is all the basic information an employer would need to verify that an applicant did possess a license to practice.

The fifth major element is that of *internship(s)*. As stated earlier, if the vita reviewer is a professional psychologist, s/he would be very familiar with the type of work duties an intern typically has. It would be best to write just a capsule

summary of the internship experience, perhaps ten lines or so.

The sixth major element is that of *professional experience*. List any professional experience you may have from the current or most recent position to the least current. Provide a seven to ten line capsule summary of duties and responsibilities for that position. Make sure to list the month and year you started the position as well as the month and year you left the position. Then list the exact job title you held in that position, followed by the agency/institution you were with, and the city/ state. If you only had teaching assistant or research assistant duties as pre-doctoral professional experience, feel free to list that in this area.

The seventh (*administrative experience*) and eighth major elements (*teaching experience*) are "optional" areas to list, as not every person seeking a clinical practice position may have this type of experience. Some positions may involve supervision of interns or practicum students, depending upon the size of the agency or institution, and the seventh area allows for any supervisory or managerial tasks you may have had to do to be properly showcased.

The ninth (*major or representative publications*), and tenth major elements (*major or representative presentations*) are typically areas that doctoral students are involved in during their course of study. However, these activities are not necessarily required, supported, or valued by the general clinical practice community. Most applicants tend to list all of their publications and presentations, which only adds more length to the vita. My own opinion about publications and presentations is this: all things considered equal, every doctoral applicant for a position has pretty much the same course content area, the same internship experiences, etc. If that is the case, how does one applicant distinguish themselves from another to either get an interview, or a job offer ?. There are two ways to do this: name recognition of the doctoral granting institution; or, having a couple of nice publications in some high ranking journal and/or presentations at

the national level. When reviewing vitae, my own preference is for an applicant who has demonstrated the ability and willingness to do more than a job description requires, and a couple of publications and presentations will show that.

The eleventh, and last major element is *honors/achievements/organizations*. Include in this area any educational societies you may belong to (Psi Chi; Phi Beta Kappa; etc.) along with memberships in any other professional organizations, specifically the American Psychological Association (APA) and any divisional memberships in APA. Several lines under this area, indicate that *references, transcripts, pre-prints and reprints will be made available upon request.*

Summary

If the outline (p. 6 and p. 10) for a clinical practice vita is followed, an applicant will be providing a prospective employer with the exact information the employer wants, in the exact order the employer may want it. All this could lead to an applicant getting more job interviews and several potential job offers.

OUTLINE FOR CLINICAL PRACTICE VITAE

1. **Name, address, phone number, and e-mail address**

2. **Objective(s)** - should pertain to the position for which you are applying

3. **Educational Experience** - degrees; institution; year obtained

4. **Licenses/Certification** - list license title; state granted from; certificate number

5. **Internship(s)** - give a brief capsule summary of experience, under 10 lines

6. **Professional Experience** - list in reverse chronological order from most recent to first position in field. Include teaching in this section if you like

7. **Administrative Experience** - (optional)

8. **Teaching Experience** - (optional to list here or in # 6)

9. **Major or Representative Publications** - list only those you believe to have relevance to your objectives statement

10. **Major or Representative Presentations** - list only those you believe to have relevance to your objectives statement

11. **Honors / Achievements / Organizations** - list any honors you received as an undergraduate or graduate student, any special achievements, and professional organizations you may belong to, and APA had better be one of them, along with any divisional affiliation !

References

Brems, C., Lampman, C., & Johnson, M. E., (1995). Preparation of applications for academic positions in psychology. American Psychologist, 50(7), 533-537.

Tentoni, S.C. (1997a). The Process of Finding a Clinical Practice Position, presented in Symposium Finding First Jobs: Perspectives From Both Sides of the Interview Desk at the 105th Annual Convention of the American Psychological Association (August), Chicago, Il.

Tentoni, S.C. (1997b). Finding your first job in professional psychology: The process of getting a clinical practice position. Milwaukee, WI: University of Wisconsin—Milwaukee, Norris Health Center. Report No. CG 027 927. (***ERIC*** Document Reproduction Service No. ED 410 481)

APPENDIX A

(SAMPLE OF TYPICAL MASTER'S LEVEL VITA) APPENDIX A: ITEM 1

OBJECTIVE: A professional position utilizing my counseling and personal development skills working with individuals, couples and families.

EDUCATION:

M.S., Marriage & Family Therapy. 1994.
University in conjunction with Counseling Service,

B.A., Communications. 1990.
University Of

Program of Foreign Study. 1988.
University Of

PROFESSIONAL EXPERIENCE:

Family Therapist Intern. 1992-1994.
Youth Eastside Services,

- Provided individual, couple and family therapy for adolescents and their families, focusing on personal growth and self advocacy issues.
- Taught anger management classes.
- Facilitated support groups for teen parents.
- Attended professional training seminars.
- Performed live family counseling, as therapist and consultant, using reflecting team and solution focused therapy.
- Maintained appropriate records and documentation.

Customer Service Supervisor. 1990 - 1992.
Spirit Of

- Hired, supervised, and trained sales representatives.
- Led weekly sales meetings.
- Interfaced with customers and employees to resolve problems.
- Developed and implemented incentive sales program.
- Employee of the year, 1991.

RELATED EXPERIENCE:

Volunteer Therapist. 1994.

Counseled inner city low income families.

Youth Leader. 1990 - 1993.
Young Life , Planned and led weekly groups. Met with students individually to support and encourage them academically and emotionally. Counseled adolescents at summer camps and weekend retreats.

Camp Counselor. 1993.
Camp of the

Volunteer Advocate. 1990 - 1991.
Teen Feed Program,
Provided counseling and support for teenagers.

Student Leadership Team. 1989 - 1990.
University

Professional Manager, Educator, Clinical Social Worker,
Certified Alcohol and Drug Counselor

(SAMPLE OF TYPICAL M.S.W. LEVEL VITA)

APPENDIX A · ITEM 2

CERTIFICATIONS:

Certified Teacher - . Board of Vocational, Technical and Adult Education.
Academy Certified Social Workers.
Board Certified Diplomate in Clinical Social Work.
Certified Alcohol Drug Counselor III.
International Certified Alcohol/Drug Counselor.
Independent Clinical Social Worker.
Certified School Social Worker, Teacher K-14.

PROFESSIONAL EXPERIENCE:

_____ BEHAVIORAL SERVICES ( ) - Psychotherapist -
(06/94 to Present)

_____ UNIVERSITY - Lecturer and Instructor - (09/93)
Teach research fundamentals in adult education.

_____ COLLEGE - Lecturer and Instructor -
(10/87 to Present)
Regularly conduct formal weekend training in the area of counseling intervention and strategies designed for the AODA population. This training is approved by the Department of Public Instruction.

_____, INC. - Administrative Consultant/Psychotherapist -
(10/87 to Present)
Responsible for proposal writing for funding from the county, state, and federal governments. Provide screening, intake, and counseling services to individuals of alcohol and drug abuse.

UNIVERSITY _____ - Lecturer and Instructor -
(08/86 to Present)
Taught 15 courses in Community Education and 1 course in Social Work Education in the evenings.

_____ CHILD DEVELOPMENT CENTER - Director of Family Resource Department -
(09/90 - 09/92)
Responsible for the day-to-day management of four federally funded special projects. Supervised staff and program activities. Wrote proposals for funding at county, state, and federal levels. Supervised social work students from the University

UNIVERSITY _____ - Field Instructor for Social Work Practice -
(01/91 - 08/92)
Supervised field instruction of undergraduate students from the School of Social Welfare, who had a special interest in substance abusing women and their families.

_____ CENTER - Clinical Consultant -
(11/90 - 07/91)
Reviewed client charts for quality assurance.

_____ TECHNICAL COLLEGE - Lecturer - (09/90 - 12/90)
Taught a required course on Group Dynamics in Human Services.

PROFESSIONAL EXPERIENCE: (Continued)

_____ _____ COLLEGE - Lecturer - (08/87 - 06/88)
Taught courses on Health Administration to persons enrolled in the Program Management for Adults.

VETERAN AFFAIRS MEDICAL CENTER - Clinical Social Worker - (08/84 - 08/90)
Provided screening, intake, and counseling services to applicants and residents of the Alcohol and Drug Program, and in the Oncology Program. Conducted individual, group, and family therapy. Served as a member of a multidisciplinary team.

_____ _____ COLLEGE - Director of Graduate Social Work Field Instruction - (09/81 - 06/84)
Managed and directed all aspects of field instruction for 135 students, 90 Field Instructors and 115 agencies. Selected agencies, screened, assigned and monitored student progress on crisis intervention, planned and conducted field instructor meetings.

_____ _____ COLLEGE - Assistant Professor - (09/77 - 06/84)
Taught 40 or more graduate and undergraduate social work courses in an Accredited Social Work Education Program. Served on academic committees and was student advisor and field liaison.

VETERANS AFFAIRS MEDICAL CENTER - Management Internship - (06/83 - 09/83)
Served as a management intern as partial requirement for Doctorate Degree.

UNIVERSITY _____ - _____ _____ - Assistant Professor of Social Work Education - (09/75 - 08/77)
Taught graduate and undergraduate social work education courses.

_____ MENTAL HEALTH CENTER - Psychotherapist - (09/74 - 08/77)
Conducted intake, assessment and diagnosis, individual and group psychotherapy.

_____ _____ MENTAL HEALTH CENTER - Director of Satellite Mental Health Centers - (11/72 - 06/74)
Responsible for the day-to-day supervision of staff and program management at 5 satellite outpatient mental health clinics.

EDUCATION:

Graduate College -
* Doctor of Philosophy - Human Services Administration

University -
* Master of Psychiatric Social Work

University -
* Bachelor of Arts - Political Science/Psychology

PROFESSIONAL AFFILIATIONS:

American Association of University Professors
National Association of Social Workers
National Counselors
Chapter Social Workers
Health Coalition
National Studies
Who's Who Executives
Who's Who in Education
Member, Board of Directors, Center
Certificate of Merit, Dictionary of International Biography
Chapter Links, Inc.

Academy of Certified Social Workers
Mental Health Technical Advisory Board
National Council on

REFERENCES:

Available upon request.

VITAE

APPENDIX A: ITEM 3

(SAMPLE OF TYPICAL NEW Ph.D's VITA)

PERSONAL DATA

Social Security Number:
Birthdate:
Marital Status:

EDUCATION

Ph.D., 1994	University, (APA approved program) Major field: Clinical Psychology Related Area: Social/Personality Dissertation: Personality Variables: Their Impact on Exposure to Traumatic Events and Development of Post-Traumatic Stress Symptoms Major Professor: Scott , Ph.D.
1991	Passed Preliminary Examination Title: Development of an S-S Learning Model of Posttraumatic Stress Disorder
M.S., 1988	University, (APA approved program) Major field: Clinical Psychology Thesis: Process and Outcome Variables in Crisis Calls Major Professor: Don , Ph.D., Director
B.S., 1984	University of Major Field: Psychology

PROFESSIONAL AFFILIATIONS

American Psychological Association
American Psychological Association - Division 12
Midwestern Psychological Association
Society for Traumatic Stress Studies

GRANTS

Assessing Response to Crisis Events at the University Psychological Services Center, Crisis Resource Foundation, 1990.

SUMMARY OF SUPERVISED CLINICAL EXPERIENCE

August, 1992 to August, 1993 — Clinical Intern, V.A. Medical Center

Duties: Provided individual and group psychotherapy with adults participating a variety of residential aftercare programs. Co-facilitated several process-oriented groups including a group for survivors of childhood abuse, a trauma group for Vietnam combat veterans, a relapse prevention group, and a coping skills group. Approximately 20% of time was devoted to conducting neuropsychological assessments with medical and psychiatric patients. Attended weekly staff development meetings.
Supervisors: Vickie , Ph.D.
Robert , Ph.D.

August, 1987 to June, 1992 — Associate Staff Therapist, Psychological Services Center, University,

Duties: Outpatient based assessment and therapy with adults. Duties included the provision of individual, couples, and group therapy. Intake and on-call duty for emergency walk-ins accounted for three to five hours per week of clinical duties. Conducted remedial workshops in test anxiety, procrastination, dating skills and assertion skills. Was instrumental in the development of a Depression Management Group and a men's Dating Skills Group. Also, co-facilitated two process-oriented groups, a Human Relations Group for high functioning adults and a Coping Skills Group for adults experiencing long-term difficulties coping. Attended weekly staff development meetings.
Supervisors: James , Ph.D., Director
Rebecca , Ph.D.
Mary , Ph.D.
John , Ph.D.
Teresa , Ph.D.

January, 1991 to August, 1991 — Staff Therapist, Personnel Development Group,

Duties: Outpatient based assessment and therapy with adults. Duties included provision of individual and conjoint therapy, participation in fitness for duty evaluations, and critical incident stress debriefings with fire fighters. Population consisted of city employees including police and fire fighters.
Supervisor: Don , Ph.D., Director

August, 1988 to December, 1988

Neuropsychology Assessment Practicum
University,

Duties: Administered and scored the Halstead-Reitan Neuropsychological Test Battery and the WAIS-R.
Supervisor: Mary , Ph.D.

May, 1988 to August, 1988

Psychology Trainee
Medical Center,

Duties: Assessment and therapy with adults in a therapeutic community for the treatment of drug abuse. Responsibilities included screening admissions, providing individual and group therapy, and participating in multidisciplinary treatment teams. Co-facilitated several groups including: 1) Relapse Prevention; 2) Gestalt; 3) Transactional Analysis; 4) Synanon; and 5) Assertion Training.
Supervisor: James , Ph.D.

May, 1987 to August, 1987

Psychology Trainee
Veterans Administration Medical Center,

Duties: Inpatient based assessment and treatment with adults. Duties included conducting intake interviews, providing individual and group psychotherapy, and performing psychological assessments. Co-facilitated four groups: 1) Assertion Training; 2) Depression Group; 3) Discussion Group; and 4) Couples Group for the Neurologically Impaired. Additional responsibilities included representing Psychology at multidisciplinary treatment team meetings. Attended weekly staff training meetings.
Supervisor: Carol , Ph.D.

August, 1986 to May, 1987

Adult Clinical Practicum
University,

Duties: Provision of individual and conjoint therapy to graduate and undergraduate students.
Supervisor: Clifford , Ph.D.

August, 1986 to August, 1987

Child Clinical Practicum
University,

Duties: Assessment and therapy with child clients and their families residing in the greater area. Population varied greatly in terms of socioeconomic background and presenting concerns.
Supervisors: Judith , Ph.D.
Don , Ph.D., Clinical Director

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May, 1986 to August, 1986

Psychology Trainee
Veterans Administration Medical Center,

Duties: Inpatient based assessment and treatment with adults on either a psychiatric unit or a behavioral medicine unit. Duties on the psychiatric unit included conducting intakes, providing individual therapy, conducting psychological assessments, and representing Psychology at multidisciplinary treatment team meetings. Duties on the behavioral medicine unit included providing individual psychotherapy to cardiac and stroke patients. Attended weekly staff training meetings and received specific training in the following areas: provision of supervision; hypnosis; and the management of disturbed behavior.
Supervisors: John , Ph.D.
Howard , Ph.D.

June, 1984 to August, 1985

Co-therapist
Correctional Institution,

Duties: Co-facilitated a dynamically oriented group for convicted felons serving terms ranging from five years to life. Additional duties included screening inmates for the Sex Offender Treatment Group, and conducting diagnostic interviews to assess level of psychopathy.
Supervisors: Mark , Ph.D.
Richard , M.D.

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SUPERVISED GROUP AND WORKSHOP EXPERIENCE

Residential Aftercare Groups

Trauma Support Group: V.A. Medical Center,
This was a process-oriented group for Vietnam combat veterans. The group provided a forum for exploring the impact of combat experiences on current functioning. Group members were encouraged to examine their experience from varying perspectives and to develop healthy strategies for coping with symptoms of traumatic stress. August, 1992 - February, 1993
Supervisor: Vickie , Ph.D.

Relapse Prevention Group: V.A. Medical Center,
This was a process-oriented group for Vietnam combat veterans with a history of alcohol or drug abuse. Group participants were encouraged to explore triggers to relapse and develop strategies for coping with urges and cravings. August, 1992 - May, 1993
Supervisor: Vickie , Ph.D.

Coping Skills Group: V.A. Medical Center,
This was a group for Vietnam combat veterans and it contained both didactic and process components. Some of the issues addressed in the group included assertiveness, coping with sleep disturbances, and developing healthy relationships. Members were encouraged to provide candid feedback and to examine their own coping strategies. August, 1992 - May, 1993
Supervisor: Vickie , Ph.D.

Survivors Group: V.A. Medical Center,
This was a group for veterans reporting physical, sexual, or emotional abuse in their family of origin. Many of the group members were in the early phase of the recovery process. Group members were encouraged to explore the effect of these early childhood experiences on current functioning. December, 1992 - February, 1993
Supervisor: Vickie , Ph.D.

Outpatient Groups and Workshops

Dating Skills Group: Psychological Services Center, University,
This was a process-oriented group for men experiencing difficulty forming or maintaining romantic relationships. The group provided a forum for examining impediments to development of relationships and strategies for overcoming difficulties. Group members were encouraged to examine their views of themselves when making dating decisions. January, 1991 - April, 1991
Supervisor: John , Ph.D.

Dating Skills Workshop: Psychological Services Center, University, This was a 1-1/2 hour long workshop for men experiencing some difficulty in dating situations. The format was didactic and information on interpersonal style was provided. Participants were encouraged to consider personal interests and goals when making dating decisions. October, 1990
Supervisor: John , Ph.D.

Coping Skills Group: Psychological Services Center, University, This was a process-oriented group for undergraduate and graduate students experiencing long-standing psychological difficulties. The group provided a forum for clients to address basic problems in living that they were experiencing. Members were provided concrete feedback by group leaders. January, 1990 - April, 1990
Supervisor: Rebecca , Ph.D.

Human Relations Group: Psychological Services Center, University, This was a process-oriented group for relatively high functioning adults with presenting complaints related to interpersonal difficulties. Issues discussed included trust, how to give and receive feedback, assertiveness, and self-expression. Members were encouraged to provide feedback within this supportive context. January, 1989 - April, 1989
Supervisor: Rebecca , Ph.D.

Depression Management Group: Psychological Services Center, This was cognitive-behavioral group for persons with presenting complaints of persistent feelings of depression. Clients learned about the relationship between thoughts and feelings through which they became better able to modify their feelings. October, 1988 - December, 1988
Supervisor: James , Ph.D., Director

Test Anxiety Workshops: Psychological Services Center, University, These didactic workshops were two hours long and focused on test anxiety experienced by graduate and undergraduate students. Information about test anxiety was provided within a cognitive-behavioral framework. Practical relaxation techniques were described and practiced. September, 1987 - May, 1988
Supervisor: Mary , Ph.D.

Procrastination Workshops: Psychological Services Center, University, These didactic workshops were two hours long and focused on causes for procrastinating and techniques for changing habits. September, 1987 - May, 1988
Supervisor: James , Ph.D., Director

Inpatient Drug Treatment Groups

Gestalt Group: Medical Center,
This was a Gestalt therapy group for clients in an inpatient drug treatment facility. Through the use of techniques such as the "empty chair", clients worked through personal issues. May, 1988 - August, 1988
Supervisor: James , Ph.D.

Transactional Analysis Group: Medical Center,
This was a transactional analysis group for inpatients on a drug treatment unit. The group format was didactic and information was provided on ego states, and egograms were constructed for all group members. May, 1988 - August, 1988
Supervisor: James , Ph.D.

Assertion Training Group: Medical Center,
This was a group was for inpatients on a drug treatment unit. The group format was primarily didactic although patients were encouraged to examine their own interpersonal style and to provide feedback to others. May, 1988 - August, 1988
Supervisor: V , MSN

Relapse Prevention Group: Medical Center,
This was a group for inpatients on a drug treatment unit that focused on preventing relapse. Patients were encouraged to explore antecedents to drug use, and alternative coping strategies. The theme of the group was that relapse often begins prior to drug use and the goal was identify "relapse signs." May, 1988 - August, 1988
Supervisor: James , Ph.D.

Values Clarification Group: Medical Center,
This was a process-oriented group for inpatients on a drug treatment unit. The group provided a forum for patients to re-evaluate personal goals. Patients were encouraged to provide and accept feedback. May, 1988 - August, 1988
Supervisor: V , MSN

Inpatient Psychiatry Groups

Couples Group for the Neurologically Impaired: Veterans Administration Medical Center, This was a process-oriented group for couples in which one partner had experienced a cerebrovascular accident. Topics discussed included life-style changes, feelings of guilt about the accident, and power/control issues in the relationship. May, 1987 - August, 1987.
Supervisors: Carol , Ph.D.
James , Ph.D.

Depression Group: Veterans Administration Medical Center,
This was a process-oriented group for inpatients on an psychiatric unit with presenting complaints of severe depression and suicidal ideation. Patients were encouraged to explore feelings and to use the group as a forum to reality test. May, 1987 - August, 1987
Supervisors: Carol , Ph.D.
Mark , Ph.D.

Discussion Group: Veterans Administration Medical Center,
This was a group for long-term inpatients on a psychiatric unit. The group focus was in improving basic socialization skills of these patients. Group members were encouraged to discuss daily events, discharge plans, and future goals. May, 1987 - August, 1987
Supervisors: Carol , Ph.D.
Mark. , Ph.D.

Assertion Training: Veterans Administration Medical Center,
This was a two-session assertion training group. Clients were inpatients on a psychiatric ward referred by nurses, physicians, and psychologists. There were both didactic and experiential components to the group. May, 1987 - August, 1987
Supervisor: Carol , Ph.D.

COMMUNITY OUTREACH

April, 1988 **Test Anxiety**
University's Span Plan Group. I gave a two-hour invited talk about test anxiety among older, nontraditional students.

November, 1987 **Avoiding Procrastination**
University's Chapter of Triangle House. I gave a two-hour invited talk about procrastination among graduate and undergraduate students majoring in engineering.

August, 1986 to August, 1987 **Crisis Hotline Worker**
Crisis Intervention Center,
This was a 24-hour telephone based crisis intervention service. I worked weekly four hour long shifts.

SUMMARY OF ASSESSMENT EXPERIENCES

Type of Test	Number Administered and Interpreted
Intellectual Abilities	
Wechsler Adult Intelligence Scale - Revised	21
Wechsler Intelligence Scale for Children - Revised	6
Stanford-Binet Intelligence Scale	3
Shipley-Hartford Intelligence Test	150***
Shipley Institute of Living Test (drug treatment unit)	7
Kaufman Assessment Battery for Children	3
Achievement Tests	
Wide Range Achievement Test - Revised	4
Personality	
Schedule for Affective Disorders and Schizophrenia	160***
Minnesota Multiphasic Personality Inventory	48
Minnesota Multiphasic Personality Inventory (drug treatment unit)	1
Rorschach	6
Thematic Apperception Test	5
Thematic Apperception Test (drug treatment unit)	1
Child Depression Inventory	1
Bender Motor Gestalt Test	4
Bender Motor Gestalt Test (drug treatment unit)	1
Benton Visual Retention Test (drug treatment unit)	1
Neuropsychological	
Wechsler Memory Scale	13
Adult Neuropsychological Questionnaire (drug treatment unit)	1
Halstead-Reitan Neuropsychological Test Battery	19
Stanford Diagnostic Reading Test	6
Finger Oscillation Test	12
Grooved Pegboard	12
Trails A & B	20

*** These tests were administered prior to graduate school.

TEACHING AND SUPERVISORY EXPERIENCE

September, 1993 to December, 1993 Counseling and Psychotherapy
Senior/Graduate Level Course
College,

Duties: Responsible for the development and implementation of an advanced undergraduate course. The major course objective was to provide students with a basic understanding of major approaches to psychotherapy. Independent thinking was fostered and students were encouraged to critically examine each therapeutic approach.

August, 1989 to December, 1989 Practicum in Supervision
Psychological Services Center, University,

Was supervised in providing direct supervision to one associate staff therapist.
Supervisor: James , Ph.D., Director
Direct Contact: 16 Hours

July, 1989 **Workshop Leader - Critical Incident Stress Debriefing**
Fire Department,

This was a three day long invited workshop in which a selected group of fire fighters were trained as peer support workers. Information was presented on the psychological and physical reaction to trauma, strategies for coping personally, and crisis intervention skills. Workshop participants role-played typical post-trauma scenarios in which they were helpers.

August, 1988 **Prepracticum Workshop Leader**
University,

This was a day long invited workshop for graduate students in clinical psychology. Information was presented on active listening skills, questioning, and labeling of client feelings. Time was spent role-playing these skills.

August, 1986 to May, 1987 **Crisis Intervention**
Junior/Senior Level Course
University,

Duties: Responsibilities included designing and administering examinations, leading role-play groups, and providing individual instruction for students.
Supervisor: Don , Ph.D., Clinical Director

August, 1986 to May, 1987 **The Psychology of Adjustment**
Sophomore/Junior Level Course
University,

Duties: Responsibilities included running two weekly dialogue sessions with approximately 30 students, designing and administering examinations, and providing individual instruction for students.
Supervisor: Rebecca , Ph.D.

August, 1985 to May, 1986 — Introductory Psychology
Freshman/Sophomore Level Course
University,

Duties: Responsibilities included running five weekly dialogue sessions with approximately 30 students, designing and administering examinations, and providing individual instruction for students. In conjunction with this position, I enrolled in a course designed to teach techniques for teaching psychology to college students.
Supervisor: Joseph , Ph.D.

RESEARCH EXPERIENCE

September, 1992 to May, 1994 — Doctoral Dissertation
University,

Personality Variables: Their Impact on Exposure to Traumatic Events and Development of Posttraumatic Stress Symptoms
This study tested a diathesis stress model of PTSD. Particular attention was devoted to personality variables that predict trauma exposure and symptom development
Supervisor: Scott , Ph.D.

August, 1985 to December, 1988 — Masters Thesis
University,

Process and Outcome Variables in Crisis Intervention
This study was an empirical test of a three-phase model for telephone-based crisis intervention.
Supervisor: Don , Ph.D.

June, 1984 to August, 1985 — Principal Research Assistant
Correctional Institution,

This was a full-time, paid position in a maximum security prison for adult male felons. I was responsible for the implementation of a study examining interpersonal behavior among psychopaths utilizing a version of the Prisoner's Dilemma Game.
Supervisor: Mark , Ph.D.

January, 1984 to May, 1984 — Senior Honors Thesis
University of

Differential Effects of Sexually Aggressive Movies on Impulse-Prone Individuals. This study examined the psychological effects of long-term exposure to sexual and aggressive commercially released movies.
Supervisor: Steven , Ph.D., JD

PUBLICATIONS AND PRESENTATIONS

(19). Process and outcome variables in crisis calls. Unpublished master's thesis,

(June, 19). Testing a three-phase model of crisis intervention. Paper presented at the conference of the Midwestern Psychological Association, Chicago, IL.

(May, 19). Testing a three-phase model of Crisis intervention. Paper presented at departmental colloquia, Purdue University, West Lafayette, IN

(19). Development of a S-S learning model of Posttraumatic Stress Disorder. Manuscript submitted for publication.

(June, 19). Traumatic events and posttraumatic psychological symptoms among college students. Paper presented at the conference of the Midwestern Psychological Association, Chicago, IL.

(May, 19). Reliability and validity of a self-report measure of Posttraumatic Stress Disorder. Paper presented at the conference of the Midwestern Psychological Association, Chicago, IL.

(April, 19). Personality and posttraumatic stress symptomatology: A reexamination of the Eysenck Personality Questionnaire. Paper presented at the conference of the Midwestern Psychological Association, Chicago, IL.

(April, 19). Incidence and impact of traumatic events among outpatients at a college counseling center. Paper presented at the conference of the Midwestern Psychological Association, Chicago, IL.

(19 , October). Validation of a measure of PTSD among college students. In (Chair), Assessment of PTSD by self-report measures: Implications for construct validity. Symposium presented at the International Society of Traumatic Stress Studiess, San Antonio, TX.

(19 , May) Development of a diathesis-stress model of Posttraumatic Stress Disorder. Paper presented at the conference of the Midwestern Psychological Association, Chicago, IL.

(19). Prevalence of traumatic events and post-traumatic psychological symptoms in a nonclinical sample of college students. Journal of Traumatic Stress _(2), 289-302.

ADVANCED TRAINING EXPERIENCES

Criminals - Cognitive Functioning and treatment Stanton , Ph.D., Hospital, November 28, 1990.

Psychodynamic Time-Specified Psychotherapy Ed , Ph.D. Psychological Services Center, University, October 11, 1990.

Advanced Interpretation of the MMPI Raymond D. Fowler, Ph.D. Memorial Hospital, Focus on interpretation of clinical and special scales of the MMPI. Information on the revised MMPI was also presented. March 11, 1989.

Stay Safe: Managing Disturbed Behavior: Veterans Administration Medical Center, This continuing education class incorporated didactic and experiential components. Lecture material focused on verbal interventions, and staff attitudes which may contribute to aggressive behavior in patients. Time was spent practicing single and team restraint techniques. July 25, 1986.

COMMITTEE EXPERIENCE

Associate Staff Representative on Search Committee: Served as a representative of the Associate Staff on a candidate search committee at the Psychological Services Center. March, 1989.

Clinical Student Representative: Served as a liaison between students and clinical faculty. Also, provided feedback from students on current preliminary examination procedures along with suggestions for improvements. August, 1987 - May, 1988.

PERSONAL REFERENCES

James , Ph.D.
Coordinator, Psychology Training Program
VAMC
Psychology Service

June , Ph.D.
Staff Psychologist,
Sobriety Living Unit

Psychology Service

Dee , Ph.D.
Coordinator, Domiciliary Care Program
VAMC
Psychology Service

APPENDIX B

(SAMPLE OF A MORE ORGANIZED VITA) , Psy.D.

APPENDIX B : ITEM 1

Home ( )
Work ( )

Education

6/ - 11/ **Doctor of Clinical Psychology,** Specialization in Health Psychology
(A.P.A. Accredited Program)
School of Professional Psychology,
Clinical Research Project - Attraction and Involvement in Psychology Training

9/ -5/ **Bachelor of Science, Psychology;** area of concentration,
University of

License

1/ **Temporary Psychologist -**
State of

Clinical Positions

9/ - Present **Assistant Director and Training Director**
University, Counseling Center,

• Direct Clinical Services: Provide intake, individual and couples therapy about twenty hours per week. Co-led eight month graduate student psychotherapy group. Provide crisis intervention services including every other month on-call beeper duty. Provide limited counseling and referral services to university staff and faculty. Lead women's support group. Advocate for students institutionally, particularly with campus police.

• Administration: Assume responsibility for the Counseling Center in the Director's absence. Member of the AIDS Awareness Committee, Women's Center Board and Residence Hall Director / Counseling Center Liaison Committee. Screened, interviewed and selected Counseling Center support staff. Responsibility for managing Center waiting list. Update various Center forms. Serve on the Student Development Advisory Board and Students Activities Cluster of the Student Development Division. Weekly business meetings with Center Director. Prepare various elements of Center budgets including proposal for above base budget request. Chaire Center's Brochure Committee and produce flyers for staff and faculty concerning students with emotional difficulties. Coordinate and direct Center retreats. Occasional participation in Vice President for Student Development meeting.

(Assistant Director and Training Director - continued)

• Training Director duties: Recruit, select, supervise, and evaluate interns. Assign interns to additional supervision. Chaire bi-weekly supervisor's meeting. Organize and led (or co-led) weekly issues focused seminars for interns. Topics included brief psychotherapy, cross-cultural counseling, sexual orientation, career development, suicide, diagnosis, depression and others. Co-led intern group supervision. Oversight of intern projects.

• Outreach and Consultation: Provide frequent consultation to university staff and faculty. Present workshops on acquaintance rape, eating disorders, stress management, suicide, depression, and crisis intervention to residence hall students and staff. Facilitated Eating Disorders Panel. Prepare and present workshop at Women's Center Retreat.

11/ 5/ **Full-time stipend temporary staff position** (pre-doctoral)
_____ State University at _____
Services,

• Clinical services: Provided intake and short term individual or couples psychotherapy to sixteen to twenty clients per week. Co-led women's support group.

• Outreach: Provided stress management workshops to School of Social Work and Minority Engineering Program.

• Administration: Served weekly in business and case conference meetings.

9/ - 9/ **Psychology Intern** (A.P. A. accredited program)
University of _____ Counseling Center,

• Clinical services: Provided long term individual psychotherapy to two clients and brief individual psychotherapy to about ten clients per week; Provided intake, crisis intervention and back-up services. Co-led the following groups: 1) women's Eating Disorders Group (9 week), 2) general psychotherapy group (9 month), 3) Adults Molested as Children group (6 month), 4) structured Assertiveness Training Workshop for university staff and students (9 week). Completed two psychological batteries (WAIS-R, MMPI, TAT, Rorschach). Gave vocational counseling using the Strong-Campbell.

(Psychology Intern - continued)

• Training: Trained and supervised Equal Opportunity Program / Student Affirmative Action peer counselors. Trained "House" drop-in center peer counselors on grief and loss issues.

• Program Development and Consultation: Weekly consultant for residence hall directors. Provided outreach and consultation to residence hall advisors on depression, suicide, crisis intervention, conflict mediation and working with difficult residents. Presented an eating disorders workshop.

• Behavioral Medicine Clinic Rotation: Provided psychotherapy to three students per week and received specialized supervision (9 months). Consultant to physicians through Behavioral Medicine Committee.

• Equal Opportunity Program: Provided individual counseling and general academic advising to EOP students with particular emphasis on new students and students on academic probation. Led one-day Self-Management Seminar for incoming EOP students.

• Training Received: Individual primary supervision, three month psychoanalytically oriented supervision, group supervision, psychiatric consultation, psychodiagnostic supervision, process group. Participated in training modules on short term psychotherapy, ethics, assessment, women's and men's issues, psychopharmacology, cross cultural issues, and counseling gay and lesbian clients.

• Administration: Served on weekly case management team. Wrote proposal regarding psychological self- help literature.

9/ -6/ **Therapy Practicum**
University of

• Caseload of 7-8 clients in individual psychotherapy; provided intake interviewing, career and educational counseling; supervised hotline paraprofessionals; participated in seminars on single cases, individual and group psychotherapy, outreach, supervision of paraprofessionals, special topics and case assignment meetings; proctored national standardized tests.

9/ - 5/ **Diagnostic Practicum**
Hospital,

• Psychological interviewing, testing and evaluation of children, adolescents, adults and older adults; neuropsychological testing of headache, pain and dementia patients; participation in inpatient and outpatient neurology rounds.

7/ -9/ **Assistant Psychometrist**
Private practice of Ph.D.,
• Learned administration of cognitive, neuropsychological and personality assessment test batteries.

Teaching

7/ -12/ **Teaching Assistant** for graduate-level statistics (one quarter) and research methodologies (two quarters).
School of Professional Psychology,
• Prepared and graded tests and assignments, taught lab sections.

8/ -1/ **Teaching Assistant** for Introductory Psychology course.
University of
Department,
• Responsibility for all aspects of teaching 90 students, including one Equal Opportunity in Education class.

Major Presentations

The Basics of Presentation at the Third Annual Residence Life Student Leadership Conference, November, 19 .

(19)
Responding to in Intern Training. Poster session presented at the 99th Annual Convention of the American Psychological Association, San Francisco, CA.

(19) Helping Trainees to Respond to
in Supervision . Four hour continuing education ethics workshop, Psychological Association Spring Convention.

Professional Affiliations

American Psychological Association
American Psychological Association Division
American Psychological Association Division
American Psychological Association Division

References

Available Upon Request

(ACTUAL VITA – USING "CLINICAL" POSITION OUTLINE)

APPENDIX B : ITEM 2

STUART C. TENTONI

Address: 1024 Nagawicka Street, Delafield, Wisconsin 53018 E-mail: *stentoni@csd.uwm.edu*
Phone: *Home*: (414) 646-4519 *Work*: (414) 229-4808

OBJECTIVES: To provide administrative direction and/or clinical supervision in a mental health setting.

EDUCATIONAL EXPERIENCE

B.S., Wisconsin State University—Oshkosh, 1970

M.S., University of Wisconsin—Oshkosh, 1971

Ph.D., North Texas State University, 1974

Continuing Education: Thirty graduate credits of post-doctoral work completed in the core areas of general/experimental and school psychology, done at both Marquette University and the University of Wisconsin—Milwaukee (1975-1977).

CERTIFICATES/LICENSES

Registered Clinical Psychologist: State of Illinois, Certificate No. 71-2018
Licensed Psychologist: State of Wisconsin, Certificate No. 0622
Licensed Professional Counselor: State of Wisconsin, Certificate No. 429

INTERNSHIPS

January 1977 - April 1977: **Hartford, WI. Public School System** (half-time; non-paid). Clients consisted of grade school children referred for suspected learning disabilities or emotional disturbances. Performed complete psychological evaluations in accordance with **P.L. 94-142** (Handicapped Children's Act).

August 1973 - May 1974: **North Texas State University Counseling Center, Denton, TX.** Clients consisted of university students with a wide range of educational, career, and psychological disorders. Psychological testing, educational/vocational assessment, etc., administered as needed. Conducted individual, group, and crisis-intervention therapy, and outreach programs, as needed, with emphasis upon brief therapy model.

PROFESSIONAL EXPERIENCE

November 1989 - present: **Senior Psychologist** with the Norris Health Center, University of Wisconsin—Milwaukee, WI. Duties consist of providing individual and group short-term psychotherapy and crisis-intervention services to students, academic staff, and faculty, at a mid-sized, culturally diverse, urban university. Responsible for working with Division of Student Affairs (Dean of Students Office; Department of Residence Life; University Police; etc.) on student referrals, and providing consultation to other university academic departments.

October 1978 - October 1989: **Clinical Psychologist** with the Waukesha County Community Department of Human Services, Waukesha, WI. Responsibilities divided between the inpatient hospital and Outpatient Clinic. Hospital setting duties consisted of developing a psychological data base on all patients staying for treatment, and performing psychological evaluations at request of the hospital medical director. Conducted pre-therapy sessions with patients held on emergency detention status on AODA-related matters. Outpatient duties consisted of performing psychological evaluations with adults, adolescents, and children referred by court-order for pre-trial/pre-sentence investigations regarding need for emergency treatment; treatment in general; out-of-home placement; incarceration; custody/foster placement; and other dispositional matters. Worked closely with staff from Juvenile Intake/Disposition; Child and Adult Protective Services; AODA; and Developmental Disabilities units of the Human Services Department.

July 1977 - October 1978: **Staff Psychologist** at Kettle Moraine Hospital, Oconomowoc, WI. Provided psychological services to chemically dependent inpatient and outpatient AODA populations in a JCAH accredited specialty hospital, and served as faculty member of the AODA counselor training program.

{ ADMINISTRATIVE EXPERIENCE *(OPTIONAL)* }

October 1996 - present: **Cordinator & Training Director of the Counseling and Consultation Services Unit** at the Norris Health Center, University of Wisconsin—Milwaukee, WI. Responsible for providing administrative leadership and supervision in day-to-day operations of the counseling unit ; scheduling, supervision, and evaluation of counseling staff; provision of utilization statistics; recruiting and retention of staff; serving as departmental liaison to consulting psychiatry services and assisting in formulation of specifications for contracted services; led team in creating Operations Manual for Health Center; served as Training Director in coordinating counseling and clinical psychology student placements in the Health Center, in addition to all of the interim duties. (Served as ***Interim Counseling Director*** from November 1993 - June 1996; responsible for coordinating counseling and psychiatric services of 3.5 full-time staff and 3 part-time consulting psychiatrists; member of search and screen committees for new staff; developing stategies to increase student utilization of services; providing Director with statistical data on service utilization; member *of UWM Student Health Advisory Oversight Committee*, and Health Center representative on *UWM Rapid Response Team*.)

TEACHING EXPERIENCE

April 1995 - April 1998: **Clinical Professor**, Department of Educational Psychology, University of Wisconsin— Milwaukee, WI. Provided a practicum site, clients, and supervision to master's and doctoral level counseling students in an American Psychological Association approved Counseling Psychology program. (Formerly a **Clinical Assistant Professor**, [Sept. 1990-93], and **Clinical Associate Professor**, [Sept. 1993-95], conducting same activities in the University of Wisconsin-Milwaukee's APA-approved Clinical Psychology program.)

June 1990 - August 1990: **Lecturer** at Cardinal Stritch College, Dept. of Educational Leadership, Milwaukee, WI. Taught Education 523 - Group Tests and Measurement, a graduate level course.

January 1987 - October 1990: **Lecturer** at Carthage College, Education Dept. and the Office of Continuing Education, Kenosha, WI. Taught Education 318 - Psychological Measurement and Diagnosis, an upper level Education course, at the graduate and undergraduate level, twice per year.

REPRESENTATIVE PUBLICATIONS

Landslide Victor. (1973, November 5). ***Sports Illustrated***, *39*(19), p. 22. (no by-line).
Tentoni, S.C. (1976). The job hunt. ***American Psychologist***, *31*, 810.
Tentoni, S.C. (1978). Reduction of physiological correlates of stress using pink noise. ***Behavioral Engineering***, *5*, 5-11.
Tentoni, S.C. & High, K. A. (1980). Culturally induced postpartum depression: A theoretical position. ***Journal of Obstetric, Gynecologic, and Neonatal Nursing***, *9*, 246-249.
Tentoni, S.C. (1980). Auditory counterconditioning of negative verbal behavior. ***Behavioral Engineering***, *6*, 143-148.
Tentoni, S.C., Graham, J., & Johnson Browne, D. (1992). The failure of a group counseling program at a large urban university. ***Florida Association for Counseling and Development Journal***, *1*, 53-57.
Tentoni, S.C. (1995, May). Students deserve a stronger voice. ***APA Monitor***, *26*, 4.
Tentoni, S.C. (1995). A therapeutic approach to reduce post-abortion grief in university women. ***Journal of American College Health***, *44*, 35-37.
Tentoni, S.C. (1995). The mentoring of counseling students: A concept in search of a paradigm. ***Counselor Education and Supervision***, *35*, 32-42.

REPRESENTATIVE PRESENTATIONS

Mentoring Psychology Trainees: History, Definition, and Rationale, presented as a *Symposium* at the ***1992*** Annual Convention of the American Psychological Association in Washington, D.C., sponsors: Divisions 2, 12, 14, 16, 17, 18, 28, 30, and A.P.A. Graduate Students, and selected for the "Education Miniconvention". Served as Chairperson and co-presenter of *Professional Mentoring of Doctoral Practicum Students: An Emerging Supervisory Paradigm*.

Mentoring Skills for the Clinical Supervisor: Reconfiguring How We Train, presented as a *Symposium* at the ***1993*** Annual Convention of the American Psychological Association in Toronto, sponsor: Division 2. Served as Chairperson and co-presenter of *On Becoming a Mentor*.

Using Co-Therapy in the Training of Therapists, presented as a *Symposium* at the ***1994*** Annual Convention of the American Psychological Association in Los Angeles, sponsor: Division 29. Served as Chairperson and co-presenter of *Co-Therapy as Live Supervision: "Back to the Future" in Therapist Training ?*

How to Prepare A.P.A. Program Proposals.....And Why You Should, presented as a *Symposium* at the ***1995*** Annual Convention of the American Psychological Association in New York City, sponsor: APAGS. Served as Chairperson and co-presenter of this program, which was specially featured by APAGS.

Finding a Research Topic, presented as a *Symposium* at the **1997** Annual Convention of the American Psychological Association in Chicago, sponsor: APAGS. Served as Co-chairperson and co-presenter of *The Research Process: Getting Started, Finding Topics, and Ethics*.

A Mentoring Paradigm for Clinical Supervisors and Future Academicians, presented as a *Continuing Education Workshop* at the **1997** Annual Convention of the American Psychological Association in Chicago, sponsor: APA Continuing Education Committee. Served as primary instructor.

Building a Vita For the Clinical Practice Position, presented as a *Symposium* at the **1998** Annual Convention of the American Psychological Association in San Francisco, sponsor, APAGS. Co-presenter of *Vitae Construction and Format for Clinical, Academic, and Research Positions*.

HONORS / ACHIEVEMENTS / ORGANIZATIONS

Phi Delta Kappa: Honorary Society in Education
Psi Chi: Honorary Society in Psychology
Psychiatry/Psychology reviewer: *American Psychologist* (1993)
Physics consultant: NASA's Ames Research Center on a classified project
Member: *American Psychological Association* and *Divisions 2* (Teaching), and *38* (Health Psychology)
Member: *American Counseling Association* and its *American College Counseling Association* division
Charter Listed Registrant and Regional Director: *Prescribing Psychologists' Register, Inc.* (Passed *Series One* course)

References, transcripts, pre-prints, and reprints will be made available upon request.